

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Address

B. Received by (Printed Name)

C. Date of Delivery

address different from item 1? ☐ Yesor delivery address below: ☐ No

Diana Mey
14 Applewood Drive
Wheeling, WV 26003
5:24-cv-211 Doc. 8

JAN 7 2025

U.S. DISTRICT COURT- WVND

WHEELING, WV 26003



9590 9402 7663 2122 1738 60

2. Article Number (Transfer from service label)

7022 3330 0001 9666 3232

Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restr Delivery
- ☐ Signature Confirmatic
- ☐ Signature Confirmatic Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Rece